

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM DATAMASTER MAINTENANCE REPORT

RECEIVED By Carol Day at 10:22 am, May 28, 2015

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.				
DATAMASTER SN NAME OF AGENCY Strafford	Police Departmen	DATE OF INSPECTION		
LOCATION OF INSTRUMENT (STREET AND CITY)	Strafford 6579	ST 1933		
CHECKLIST: Place a mark in the box by each Item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked Items must be corrected before using instrument.				
☑ DIAGNOSTIC CHECK (PRINTOUT ATTACH	ED) DATE AND TIM	ME (from printout) $\frac{05/(3/15)}{15}$	5 19:33	
⊠ computer	Доетесто	3		
Program	□ FILTERS			
THEATERS SAMPLE CHAMBER	<u>°</u> c Ø⁄quartz s	TANDARD		
☐ FLOW DETECTOR	☐ CALIBRATI	ON		
2'PUMP HIGH SPEED	☑ PRINTER			
☑ INDICATOR LIGHTS				
SIMULATOR SOLUTION SUPPLIER GUT Laboratories LOT # 14200 EXP. DATE \$ 16				
SIMULATOR TEMP (34°C ± 0.2°C) 34.00 °C SIMULATOR SN $DR5379$ EXP. DATE $03/03/16$				
ACIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)				
Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)				
0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE				
TEST 1 - , \ O \ TES	T2= , 103	TEST 3 * , 103		
PERFORM R.F.I. TEST (PRINTOUT ATTACHED)				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)				
REFUSALS (7) (004) (.05-	.09) (.1014)	(.1519)	OVER .19 ()	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFIC (USE OTHER SIDE IF NECESSARY).	CATION THAT WAS MADE TO RESTORE THE INSTR	UMENT TO OPERATE SATISFACTORILY AND	WITHIN ESTABLISHED LIMITS	
INSPECTING OFFICER	- I			
SIGNATURE Jeh EVNY	PAINT FUL	ohn A Ever	2++	
TYPE II PERMIT NUMBER/EXPIRATION DATE	JELEPHON	T310 4000		
RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office				
2875 James Blvd. Poplar Bluff, MO 63901				



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations: 19 CSR 25-30.051 (4).

Checked: 02/02/2015 Expires: 02/02/2016
MSC Tech: DDD
Temp: 33.98 C Digital Therm. SN 3582
Agency: Strafford Police Dept
DR5379

Technician Printed Name: WONALD D. DE BOARD

Technician Signature: Decall D. D. Streetell

Date: 02/02/2015

Contact: Missouri Safety Center

Breath-Alcohol Instrument Training Program

660-543-4834

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI MINISPERS POLICE GERRANEME

IRC IRTRARECTER SERVAL AURBER CASABA 85/19/45

- Jiādrisīli cieta

COMPLITER:

WRYDBRAM (04-07-2599))

HEATERS

SHMPLE CHAMBERS

FLOW DETECTORY

of Mid

HIGH SECTION

<u>nevertore</u>

gyavi

Filters:

CAL IMPORTIONS

OMP'Y

Par a supplied to the

Operator Signature

Printed on recycled paper with agri-based links

CMSU 2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI STARFACE POLICE DESARTMENT

NAC DATAMESTER GERIAL MIMBER EXOTAA NEXISKIE

TESTING OFFICERS
EVERETTY JOHN/A
OFFICER 1.21; 1906
PERHIT NUMBER: 250061
SWPIRATION DATE: 32/84/17
MISSELLANEOUS DATA:

BLAMK TES		E LINE
INTERMOLIS		30192
EYTERMAL	TEMES	20:02
BLANKIES		20140
ENTERNAL	TANDATI	2912
BLEMK TES		22184
EXTERNAL		1,29,04
BLONK TES		20195

Operator Signature_

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Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOUR STRAFFORD POLICE DEPARTMENT

BAC DATAMASTER SERIAL MUNACA SAGIAA 85713415

ARREST TIME: 15108
SUBJECT NAME:
TEST/MY/AM
DOB: 05/05/05
STRIE/D.L. MO/ESSED:
ARRESTING OFFICER:
CYCRETT/OHM/A
CFAICER I.L. 1386
VESTING OFFICER:
EVERSTY JOHN A
UTFICER I.L.
EVERSTY JOHN A
UTFICER

BLANK TEST 1000 19150 INTERNEL STANDARD VERTEICH 19150 RADIO INTERSERENCE

Operator Signature_

Printed on recycled paper with agri-based inks

CMSU 2208-02



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPE II

JOHN A EVERETT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s): DATAMASTER for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. 3/4/2015 DATE ... DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 250061 EXPIRES 3/4/2017 acting director

MO 580-0771 (6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (R6-10)



Date Expires 3/4/2017